



APPLICATION FOR RENEWAL OF RESIDENTIAL MORTGAGE BROKER LICENSE

Each applicant for a renewal of a Missouri Residential Mortgage Brokers License shall file a renewal application. Pursuant to Section 443.833 RSMo, each renewal application must be sent to the Commissioner no later than sixty (60) days prior to such licensee's renewal date. Each renewal license is for a period of two (2) years. Upon approval, the *non-refundable* license fee of \$600 shall be due the Division of Finance, of which \$300 shall be paid upon the issuance of the license, and the second installment of \$300 one year after the effective license date.

The renewal application must be filed with the Division of Finance, Mortgage Brokers Section, Harry S Truman State Office Building, Room 630, P.O. Box 716, Jefferson City, Missouri 65102-0716.

The statements contained in the application form must be accurate as of date of execution. **EVERY QUESTION MUST BE ANSWERED.** "N/A" should be used if not applicable.

This renewal application must be typed.

PART I - GENERAL

LICENSE NUMBER _____

APPLICANT/LICENSEE NAME _____

ADDRESS _____

CITY, STATE, ZIP _____, _____, _____

CONTACT PERSON/TITLE _____

CONTACT PHONE (____) _____ - _____ FAX NUMBER (____) _____ - _____

FULL SERVICE MISSOURI OFFICE LOCATION (if different from shown above)

Address _____

City, State, Zip _____

Business Phone (____) _____ - _____

ADDRESSES AND TELEPHONE NUMBERS OF ALL ADDITIONAL MISSOURI OFFICES

Address _____
City, State, Zip _____
Contact Name/Title _____
Business Phone (_____)_____ - _____

Address _____
City, State, Zip _____
Contact Name/Title _____
Business Phone (_____)_____ - _____

PART II - APPLICANT INFORMATION

PLEASE PROVIDE US WITH A LIST OF:

DIRECTORS (Corporation)

_____	_____
_____	_____
_____	_____
_____	_____

PRINCIPAL SHAREHOLDERS (Owns/controls 10% or more of any stock)

_____	_____
_____	_____
_____	_____
_____	_____

PARTNERS (Partnership)

_____	_____
_____	_____
_____	_____
_____	_____

MEMBERS (Limited Liability Company)

_____	_____
_____	_____
_____	_____
_____	_____

ANY PERSON/ENTITY THAT INFLUENCES MANAGEMENT (NOT INCLUDING
THOSE SHOWN ABOVE), INCLUDING EXECUTIVE OFFICERS

_____	_____
_____	_____
_____	_____
_____	_____

PART III - APPLICANT AVERMENT

UNDER PENALTY OF PERJURY, I (WE) STATE THAT ALL OF THE FOREGOING IS TRUE AND CORRECT TO THE BEST OF MY (OUR) KNOWLEDGE AND FURTHER STATE THAT AS THE APPLICANT/LICENSEE:

- (a) Will maintain at least one full-service office within the state of Missouri as provided in section 443.857;
- (b) Will maintain staff reasonably adequate to meet the requirements of Section 443.857;
- (c) Will keep and maintain for thirty-six months the same written records as required by the federal Equal Credit Opportunity Act, 15 U.S.C. 1691, et seq., and any other information required by regulations of the director regarding any home mortgage in the course of the conduct of the applicant's residential mortgage business;
- (d) Will file with the director, when due, any report or reports which the applicant is required to file under any of sections 443.800 to 443.893;
- (e) Will not engage, whether as principal or agent, in the practice of rejecting residential mortgage applications without reasonable cause, or varying terms or application procedures without reasonable cause, for home mortgages on real estate within any specific geographic area from the terms or procedures generally provided by the licensee within other geographic areas of the state;
- (f) Will not engage in fraudulent home mortgage underwriting practices;
- (g) Will not make payments, whether directly or indirectly, of any kind to any in-house or fee appraiser of any government or private money lending agency with which an application for a home mortgage has been filed for the purpose of influencing the independent judgment of the appraiser with respect to the value of any real estate which is to be covered by such home mortgage;
- (h) Has filed tax returns, both state and federal, for the past three years or filed with the director a personal, an accountant's or attorney's statement as to why no return was filed;
- (i) Will not engage in any discriminating or redlining activities prohibited by section 443.863;
- (j) Will not knowingly misrepresent, circumvent or conceal, through whatever subterfuge or device, any of the material particulars, or the nature thereof, regarding a transaction to which the applicant is a party which could injure another party to such transaction;
- (k) Will disburse funds in accordance with the applicant's agreements through a licensed and bonded disbursing agent or licensed real estate broker;
- (l) Has not committed any crime against the laws of this state, or any other state or of the United States, involving moral turpitude, fraudulent or dishonest dealings and that no final judgment has been entered against the applicant in a civil action upon grounds of fraud, misrepresentation or deceit which has not been previously reported to the director;
- (m) Will account or deliver to any person any personal property, including, but not limited to, money, funds, deposits, checks, drafts, mortgages, any other document or thing of value, which has come into the applicant's possession and which is not the applicant's property or which the applicant is not in law or equity entitled to retain under the circumstances, at the time which has been agreed upon or is required by law, or, in the absence of a fixed time, upon demand of the person entitled to such accounting and delivery;
- (n) Has not engaged in any conduct which would be cause for denial of a license;
- (o) Has not become insolvent;
- (p) Has not submitted an application for a license under the provisions of sections 443.800 to 443.893 which contains a material misstatement;
- (q) Has not demonstrated by a course of conduct, negligence or incompetence in the performance of any activity for which the applicant is required to hold a license under sections 443.800 to 443.893;
- (r) Will advise the director in writing of any changes to the information submitted on the most recent application for license within forty-five days of such change. The written notice must be signed in the same form as the application for the license being amended;

PART III - (continued)

(s) Will comply with the provisions of sections 443.800 to 443.893, or with any lawful order, rule or regulation made or issued under the provisions of sections 443.800 to 443.893;

(t) When probable cause exists, will submit to periodic examinations by the director as required by sections 443.800 to 443.893; and

(u) Will advise the director in writing of any judgments entered against, and bankruptcy petitions by, the license applicant within five days of the occurrence of the judgment or petition.

SIGNATURE(S) OF PERSON(S) REQUIRED TO EXECUTE THIS APPLICATION FORM: ALL DIRECTORS (CORPORATIONS), PARTNERS (PARTNERSHIPS), MEMBERS (LIMITED LIABILITY COMPANY) AND PROPRIETORS.

X 1) Signature _____ Title _____

X 2) Signature _____ Title _____

X 3) Signature _____ Title _____

SIGNATURES MUST BE NOTARIZED.

STATE OF _____

COUNTY OF _____

Subscribed and sworn to me this _____ day of _____, _____.

My Commission expires _____, 20_____.

NOTARY PUBLIC

PART IV - ACCESS TO CREDIT RECORDS AND LAW ENFORCEMENT INFORMATION

I hereby authorize the Commissioner of Finance to conduct a financial and business responsibility background check, including a check of criminal records, as may be required. This form must be signed by all directors, principal shareholders, partners, members, proprietors and by anyone who influences management.

Pursuant to Section 7 of the Privacy Act of 1974, 5 U.S.C 552a, you are hereby advised that disclosure of your social security number is mandatory under Sections 443.821 and 443.825 RSMo. The social security number will be used in our background investigation of an individual's criminal history and financial background.

X 1) _____
Signature Title SSN Date

X 2) _____
Signature Title SSN Date

X 3) _____
Signature Title SSN Date

PART V - CONFIDENTIAL INFORMATION

1. IF ANY JUDGMENTS HAVE BEEN ENTERED AGAINST APPLICANT/LICENSEE WITHIN THE PREVIOUS TWENTY-FOUR (24) MONTHS, LIST HERE AND DESCRIBE ON A SEPARATE SHEET OF PAPER.

2. IF ANY PETITIONS FOR BANKRUPTCY IN THE PRECEDING TWENTY-FOUR (24) MONTHS, EITHER VOLUNTARY OR INVOLUNTARY, HAVE BEEN FILED CONCERNING APPLICANT/LICENSEE, PLEASE LIST HERE AND DESCRIBE ON A SEPARATE SHEET OF PAPER.

3. IF APPLICANT/LICENSEE HAS BEEN CONVICTED, INDICTED OR PLEADED NOLO CONTENDERE ON ANY CRIMINAL MATTER INVOLVING DISHONESTY OR BREACH OF TRUST IN ANY STATE OR FEDERAL COURT WITHIN THE PREVIOUS TWENTY-FOUR (24) MONTHS, PLEASE LIST CASE NUMBER HERE AND DESCRIBE ON A SEPARATE SHEET OF PAPER.

4. LIST ALL LICENSES WHICH YOU OR YOUR FIRM HAVE APPLIED FOR AND BEEN DENIED AND/OR ANY AND ALL LICENSES ISSUED TO YOU OR YOUR FIRM WHICH WERE SUBSEQUENTLY SUSPENDED OR REVOKED.

5. LIST ALL STATES IN WHICH YOU ARE LICENSED TO ENGAGE IN, OR ARE ENGAGED IN, MORTGAGE BROKER ACTIVITY.

6. IS THE LICENSE APPLICANT OR THE APPLICANT'S MEMBERS, DIRECTORS OR PRINCIPALS AT LEAST EIGHTEEN YEARS OF AGE AS REQUIRED BY SECTION 443.825 RSMo?

YES _____ NO _____

IF NO, PLEASE PROVIDE NAMES _____

7. EACH REQUIRED SIGNATORY ON PART IV, PAGE 4, MUST COMPLETE THE FOLLOWING MISSOURI HIGHWAY PATROL FORM "REQUEST FOR CRIMINAL RECORD CHECK".

8. PLEASE ATTACH A PERSONAL FINANCIAL STATEMENT IF APPLICANT IS A SOLE PROPRIETORSHIP AND BUSINESS FINANCIAL STATEMENT IF APPLICANT IS A PARTNERSHIP, CORPORATION, ASSOCIATION OR LIMITED LIABILITY COMPANY.

BUSINESS FINANCIAL STATEMENT

BUSINESS NAME
OF APPLICANT/LICENSEE _____

ADDRESS _____

TELEPHONE NO. _____

NAME OF PREPARER _____

BALANCE SHEET
AS OF _____

ASSETS		LIABILITIES AND CAPITAL	
DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
Cash		LIABILITIES	
Bank Accounts			
Investments			
Loans Receivable		TOTAL LIABILITIES	
Furniture, fixtures and equipment		Equity Capital or Net Worth	
Other Assets			
TOTAL ASSETS		TOTAL LIABILITIES AND CAPITAL	

PERSONAL FINANCIAL STATEMENT

I, _____ submit herewith the following
 _____ Name
 information and a correct and complete statement of my financial condition as of _____ to the
 _____ Date
 Division of Finance for its confidential use, in connection with the application filed for a mortgage brokers license.

An answer to each item is required. If the answer is "No," "None" or "Not applicable," so state. If an item of information called for is unknown, so state. If space provided on this form is inadequate, attach a separate schedule. All such schedules should be signed and dated.

ASSETS		LIABILITIES	
1) Cash on hand and in banks	\$	9) Accounts Payable	\$
2) Notes, loans, and other accounts receivable considered good and collectible		10) Notes payable to banks - from Schedule D	
3) Merchandise and inventory at lower of cost or market value		11) Notes payable to others - from Schedule E	
4) Real estate - from Schedule A		12) Real estate mortgages - from Schedule F	
5) Machinery and equipment - at cost less depreciation		13) Interest and taxes due and unpaid - from Schedule G	
6) Marketable securities - from Schedule B		14) Other debts and liabilities - from Schedule H	
7) Life insurance (face amount \$ _____) cash surrender value		TOTAL LIABILITIES	
8) Other assets - from Schedule C		15) NET WORTH	
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH	\$

NOTE: Notes, accounts receivable, mortgages and other assets considered doubtful, and not included in above financial statement have an estimated value of \$ _____.

CONTINGENT LIABILITIES (If none, so state)

In addition to the debts and liabilities listed above, have you endorsed, guaranteed, or become otherwise indirectly or contingently liable for the debts of others?

_____ Yes _____ No If "Yes," give details in the following schedule.

Name and address of Debtor or Obligor	Name and address of Creditor or Oblige	Description of Collateral	Value of Collateral	Date Obligation		Current Amount
				Incurred	Due	
			\$			\$
					Total	\$

STATEMENT OF INCOME

20____ 20____ 20____

If more
than six
months
CURRENT
YEAR

Salaries, wages, and commissions from employment				
Income from dividends and interest				
Net income from rents, royalties and investments				
Other income				
TOTAL INCOME				
Expenses				
NET INCOME				

REQUEST FOR CRIMINAL RECORD CHECK

Reference No. _____
(office use only)

SHP-158D 9/93 - Please print or type.

Name (last, first, middle) _____

(maiden/alias) _____

Date of Birth _____

Sex: __ male __ female Race _____ Social Security No. _____

Address _____

I authorize the release of any criminal history record information to the requestor.

Signature (optional) _____

It is the responsibility of the requestor to inform the Central Repository of the records that are desired and to provide the information necessary to conduct the appropriate search.

PURPOSE

Employment Child Care Nursing Home Home Health Care Other Employment

— — — —

Licensing Other (specify) _____

—

SEND REPLY TO

DIVISION OF FINANCE

P.O. BOX 716

JEFFERSON CITY, MO 65102

Telephone (include area code) (573) 751-4243

Missouri State Highway Patrol
Criminal Records and Identification Division
Post Office Box 568
Jefferson City, MO 65102